PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax

(703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

indicated unless corrected maintenance fee notificatio	below or directed otherwise ns.	in Block 1, by (a) specifying a	new correspondence addr	ess; and/or (b) in	dicating a sep	arate "FEE ADDRESS" for
	CE ADDRESS (Note: Use Block 1 for a	any change of address)	<u> </u>	Fee(s) Transmittal.	This certificate clional paper, such	annot be used as an assignm	or domestic mailings of the for any other accompanying ent or formal drawing, must
SUGHRUE MIC		0,,,	45	Certificate of Mailing or Transmission			
2100 PENNSYLVANIA AVENUE, N.W.				I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope			
SUITE 800 FEB 0 1 2				addressed to the I	Mail Stop ISSUE	FEE address	above, or being facsimile date indicated below.
WASHINGTON, 1 02/03/2005 MBEYENE2 00		,	<u>\$</u>		331 10 (103) 110	root, on the	(Depositor's name)
		TRAC	EMARITE				(Signature)
01 FC:1501 02 FC:1504	1400.00 OP 300.00 OP	····					(Date)
APPLICATION NO.	FILING DATE	FIRST NAMED		INVENTOR	ATTORNEY	DOCKET NO.	CONFIRMATION NO.
10/614,700	07/08/2003	Li Xi		-Shan	Q76	5313	7406
TITLE OF INVENTION: L	JQUID-JET HEAD LIQUID	-JET APPARATI	JS				
APPLN. TYPE	SMALL ENTITY	ISSUE FI	EE	PUBLICATION FEE	TOTAL FI	EE(S) DUE	DATE DUE
nonprovisional	nonprovisional NO)	\$300	\$10	670	02/03/2005
EXAMINER		ART UNIT		CLASS-SUBCLASS			
MRUK, GEOFFREY S		2853		347-068000			
 Change of correspondence address or indication of "Fee Address" CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custo Number is required. 			(1) the nar or agents ((2) the nar registered 2 registere	the name of up to 3 registered patent attorneys gents OR, alternatively, the name of a single firm (having as a member a stered attorney or agent) and the names of up to gistered patent attorneys or agents. If no name is d, no name will be printed. SUGHRUE MION, PLLC 2 3			
3. ASSIGNEE NAME ANI	RESIDENCE DATA TO B	E PRINTED ON T	HE PATENT	(print or type)			
PLEASE NOTE: Unless recordation as set forth i	s an assignee is identified be n 37 CFR 3.11. Completion of	low, no assignee of this form is NO	data will appo	ear on the patent. If an as for filing an assignment.	signee is identifie	d below, the o	document has been filed for
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
SEIKO EPSON CORPORATION TOKYO, JAPAN							
Please check the appropriat	e assignee category or categor	ries (will not be pr	inted on the pa	atent): 🗖 Individual 🛭	Corporation or c	ther private gr	oup entity Government
4a. The following fee(s) are	enclosed:	4b	. Payment of	Fee(s):			
Issue Fee			A check is attached for the NOA Fees payment.				
Publication Fee (No small entity discount permitted) Advance Order - # of Copies			Please charge any payment deficiency and				
Advance Order - #0	Copies		credit	overpayment to PC	DA 19-488	0.	lit any overpayment, to of this form).
	s (from status indicated above SMALL ENTITY status. See		☐ b. Applic	ant is no longer claiming SI	MALL ENTITY s	tatus. See 37 C	CFR 1.27(g)(2).
The Director of the USPTO NOTE: The Issue Fee and I interest as shown by the rec	is requested to apply the Issu Publication Fee (if required) words of the United States Pate	e Fee and Publica rill not be accepted int and Trademark	tion Fee (if an I from anyone Office.	y) or to re-apply any previ- c other than the applicant; a	ously paid issue fe registered attorne	e to the applic y or agent; or t	ation identified above. he assignee or other party in
Authorized Signature	KAL			Date	1/31/20	005	
Typed or printed name Kelly G. Hyndman				Registra	tion No. 39,	234	
This collection of informati an application. Confidentia	on is required by 37 CFR 1.3 lity is governed by 35 U.S.C.	11. The information 122 and 37 CFR	n is required to 1.14. This col	to obtain or retain a benefit lection is estimated to take	by the public which	ch is to file (an	nd by the USPTO to process)

an application. Confidentially is governor by 35 U.S.C. 122 and 37 CFR 1.14. Inis collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.